

Atty. Dkt. No. 066243-0173 (132258IT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Driver et al.

Title:

METHODS AND APPARATUS
FOR DISPLAYING IMAGES
ON MIXED MONITOR
DISPLAYS

Appl. No.:

Filing Date:

Examiner:

Art Unit:

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EV 227049294 US	9/26/03
(Express Mail Label Number)	(Date of Deposit)
Chris Escavaille	
(Printed Name)	
<i>Chris Escavaille</i>	
(Signature)	

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (29 pages).
- ☒ Formal drawings (7 sheets, Figures 1, 2, 3, 4, 5, 6, 7).
- ☐ Declaration and Power of Attorney (___ pages).
- ☐ Assignment of the invention to GE Medical Systems Information Technologies, Inc..
- ☐ Assignment Recordation Cover Sheet.
- ☐ Small Entity statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ___ listed reference(s).
- ☒ Application Data Sheet (37 CFR 1.76).
- ☐ Claim for Convention Priority.

The filing fee is calculated below:

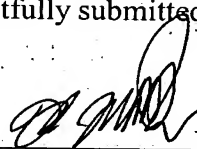
	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals	
Basic Fee							\$750.00		\$750.00	
Total Claims:	41	-	20	=	21	x	\$18.00	=	\$378.00	
Independents	6	-	3	=	3	x	\$84.00	=	\$252.00	
If any Multiple Dependent Claim(s) present:							+	\$280.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee							+	\$130.00	=	\$130.00

- ☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.
- ☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2401. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-2401.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 9-26-03

By 

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